PTO/SB/06 (08-03)
Approved for use through 7/31/2006. OMB 0651-0032
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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875									Application & Doctor Turby 99		
CLAIMS AS FILED - PART I (Column 1) (Column 2)						_	SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
	FOR	NUMBI	NUMBER FILED		NUMBER EXTRA		RATE	FEE		RATE	FEE
	CFR 1.16(a))	,	,					30	OR		s
	AL CLAIMS CFR 1.18(c))	75	minus 20 = •			1	X \$ =	1	OR	x \$=	
IND	EPENDENT CLAIN	us 3	minus 3	3		1	x \$ =	/	OR	x \$ _ =	
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.18(d))						+s =	/	OR	+,		
* If the difference in column 1 is less than zero, enter "0" in column 2.							TOTAL	415	OR	TOTAL	
CLAIMS AS AMENDED - PART II											
O	الأيدال!	(Column 1)		(Column 2)	(Column 3)		SMALL	ENTITY	OR		R THAN ENTITY
AMENDMENT A	: : ;.	CLAIMS REMAINING AFTER :		HIGHEST NUMBER PREVIOUSLY PAID FQR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI: TIONAL FEE
	Total (37 CFR 1.18(c))	8	Minus	" 20	0		x \$=		OR	x \$=	. = -
EN	Independent (37 CFR 1,18(b))	· 3	Minus	-3	-0		x \$=		OR	x \$=	
ΑÑ	FIRST PRESENT	ATION OF MULTIPL	E DEPENDE	NT CLAIM (37 CF	FR 1.16(d))		+5 =		OR	+s =	
ANG						TOTAL ADD'L FEE	10	OR	TOTAL ADD'L FEE		
3	3/21/04	(Column 1)		(Column 2)	(Column 3)				,	700 2122	
NT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATÉ	ADDI- TIONAL FEE
AMENDMENT	Total (37 CFR 1.18(c))	8	Minus	20	* Ø		x \$ =		OR	x \$=	
EN	Independent (37 CFR 1.16(b))	3	Minus	3	- (X)		x \$=		OR	x \$=	
A	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))						+\$ 0		OR	+\$_=	
						•	TOTAL ADD'L FEE	0	OR	TOTAL ADD'L FEE	
		(Column 1)		(Column 2)	(Column 3)						
ENTC		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
DME	Total (37 CFR 1.18(c))		Minus	••	8		x \$=		OR	x \$=	
AMENDMENT	(17 CFR) 16(b))	• • •	Minus	***	8		x \$=		OR	x \$=	
A	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.18(d))						+\$=		OR	+ \$ =	
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
If the entry in column 1 is less than the entry in column 2, write "0" in column 3. "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". "" If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3 enter "7".											

"If the "Highest Number Previously Pald For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete inctuding gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS, SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2